

APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

APPLICATION TO DRILL ☒ DEEPEN ☐ PLUG BACK ☐

NAME OF COMPANY OR OPERATOR Ke-La-Da Enterprises, Inc. DATE 7-9-76
Box 197 Archie, Missouri 64725
 Address City State

DESCRIPTION OF WELL AND LEASE

Name of lease <u>Ke-La-Da Enterprises, Inc.</u>	Well number <u>9</u>	Elevation (ground) <u>830 ft.</u>
WELL LOCATION (give footage from section lines) <u>660</u> ft. from (N) (S) sec. line <u>2334</u> ft. from (E) (W) sec. line		
WELL LOCATION Section <u>35</u> Township <u>43</u> Range <u>32</u>		County <u>Cass</u>
Nearest distance from proposed location to property or lease line: <u>250</u> feet		Distance from proposed location to nearest drilling, completed or applied — for well on the same lease: <u>250</u> feet
Proposed depth: <u>500 ft.</u>	Rotary or Cable tools <u>Rotary</u>	Approx. date work will start <u>7-9-76</u>
Number of acres in lease: <u>307</u>	Number of wells on lease, including this well, completed in or drilling to this reservoir: <u>3</u> Number of abandoned wells on lease: <u>None</u>	
If lease, purchased with one or more wells drilled, from whom purchased: Name _____ Address _____		No. of Wells: producing _____ inactive _____ abandoned _____
Status of Bond Single Well <input type="checkbox"/> Amt. _____ Blanket Bond <input checked="" type="checkbox"/> Amt. <u>\$10,000.00</u> <input checked="" type="checkbox"/> ON FILE <input type="checkbox"/> ATTACHED		

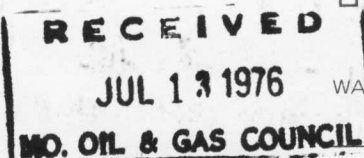
Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed.

Proposed casing program: amt. size wt./ft. cem. <u>40 ft. 6" Surface pipe</u> <u>4" pipe to producing horizon</u>	Approved casing — To be filled in by State Geologist amt. size wt./ft. cem. _____ _____ _____ _____
I, the undersigned, state that I am the <u>owner</u> of the <u>Ke-La-Da Enterprises, Inc.</u> (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge. Signature <u>Walter B. Wallace</u>	

Permit Number: 037-20098
 Approval Date: 16 July 76
 Approved By: Wallace B. Wallace

Note: This Permit not transferable to any other person or to any other location.

Remit two copies to: Missouri Oil and Gas Council
 P.O. Box 250 Rolla, Mo. 65401
 One will be returned.

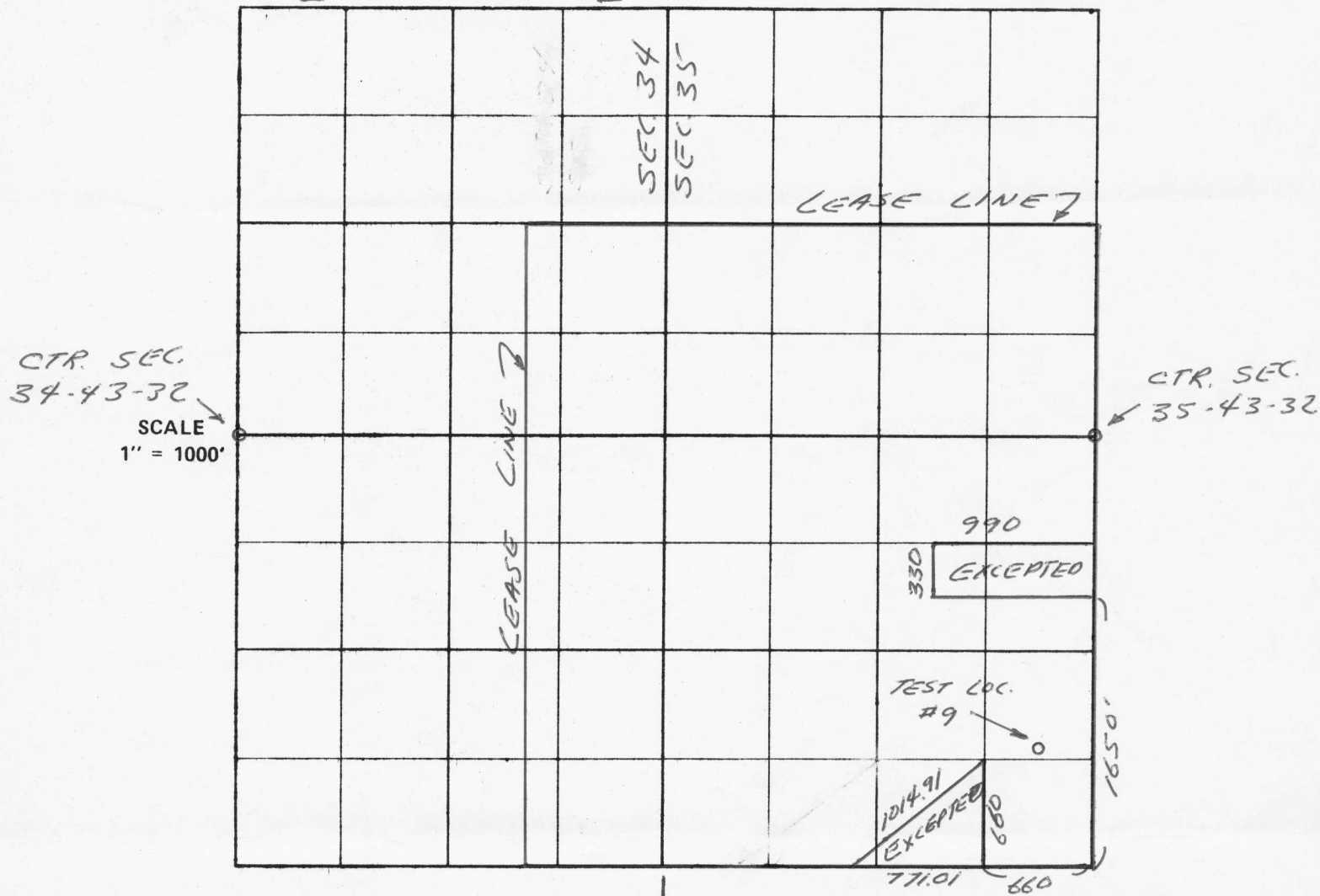


☒ SAMPLES REQUIRED
☐ SAMPLES NOT REQUIRED

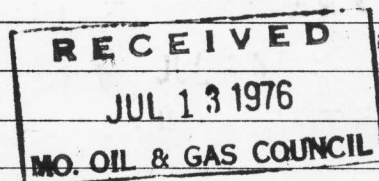
WATER SAMPLES REQUIRED @:

Form OGC - 4

660' feet from (N) - (S) line and 2334' feet from (E) - (W) line | of Sec. 35 Twp. 43 Range 32



REMARKS:



On the above plat, show distance of the proposed well from the two nearest lease and section lines, and from the nearest well on the same lease completed in or drilling to the same reservoir. If the location requested is not in conformance with the applicable well-spacing rules, show all off-setting wells to the proposed well. Do not confuse survey lines with lease lines. See rule 7 - 3 (b) for survey requirements.

(SEAL)

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Registered Land Surveyor

MISSOURI OIL AND GAS COUNCIL

Form OGC-5

WELL COMPLETION OR RECOMPLETION REPORT AND WELL LOG

New Well ☒ Work-Over ☐ Deepen ☐ Plug Back ☐ Same Reservoir ☐ Different Reservoir ☐ Oil ☐ Gas ☒ Dry ☐

Owner <i>The La Da Enterprises Inc.</i>		Address <i>Box 197 Archie, Mo 64725</i>	
Lease Name <i>Free</i>		Well Number <i>9</i>	<i>35-43-32</i>
Location <i>660 FS - 2334 FW Sec Line</i>			
County <i>Cass</i>	Permit number (OGC3 number) <i>037-20028</i>		
Date spudded <i>8-16-76</i>	Date total depth reached <i>8-18-76</i>	Date completed, ready to produce <i>8-18-76</i>	Elevation (DF, RKB, RT or Gr.) <i>830</i> feet
Total depth <i>408</i>	Elevation of casing hd. flange <i>831</i> feet		
Producing interval (s) for this completion <i>60 TO 400</i>		Rotary tools used (interval) From <i>0</i> to <i>408</i> Drilling Fluid used <i>air</i>	Cable tools used (interval) From _____ to _____
Was this well directionally drilled? <i>No</i>	Was directional survey made? <i>No</i>	Was copy of directional survey filed?	Date filed
Type of electrical or other logs run (list logs filed with the State Geologist) <i>Gamma-Ray Neutron</i>			Date filed

CASING RECORD

Casing (report all strings set in well—conductor, surface, intermediate, producing, etc.)

Purpose	Size hole drilled	Size casing set	Weight (lb. ft.)	Depth set	Sacks cement	Amt. pulled
<i>Surf. plastic</i>	<i>8</i>	<i>6 1/4</i>	<i>12 1/2</i> <i>2 1/2</i>	<i>42</i> <i>408</i>	<i>10</i> <i>none</i>	

TUBING RECORD

LINER RECORD

Size in.	Depth set ft.	Packer set at ft.	Size in.	Top ft.	Bottom ft.	Sacks cement	Screen (ft.)
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PERFORATION RECORD

ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

Number per ft.	Size & type	Depth Interval	Amt. & kind of material used	Depth Interval
<i>4</i>	<i>4 1/4</i>	<i>50 TO 400</i>	<i>None</i>	

INITIAL PRODUCTION

Date of first production <i>8-20-76</i>		Producing method (indicate if flowing, gas lift or pumping—if pumping, show size & type of pump:) <i>Flowing</i>					
Date of test <i>8-30-76</i>	Hrs. tested <i>24</i>	Choke size	Oil prod. during test bbls.	Gas prod. during test <i>20,000</i> MCF	Water prod. during test <i>5</i> bbls.	Oil gravity API (Corr.)	
Tubing pressure <i>30 1/2</i>	Casing pressure <i>70 1/2</i>	Cal'd rate of Production per 24 hr.	Oil bbls.	Gas <i>20,000</i> MCF	Water <i>5</i> bbls.	Gas—oil ratio	

Disposition of gas (state whether vented, used for fuel or sold)

Vented for test well shut in w.o.m.

Method of disposal of mud pit contents:

Air Rotary

CERTIFICATE: I, the undersigned, state that I am the _____ of the _____ (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

Signature

DEC 29 1978

MO. OIL & GAS COUNCIL

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